OCT 3 0 2007 TRADEMAN

| Under the Paperwork Reduction Act of 1995, no persons are required | | Trademark Office; U.S. DEP | | | | | | | | |
|----------------------------------------------------------------------------------------------------------------------------------------|--------------------------------|---------------------------------|----------------------------|--|--|--|--|--|--|--|
| PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) | | Docket Number (Optional) | | | | | | | | |
| FY 2006 (Fees pursuant to the Consolidated Appropriations Act, 2 | 200E (LI D 4818)) | 61154(| (71699) | | | | | | | |
| | | Filed September 28, 2006 | | | | | | | | |
| Application Number 10/594,874-Conf. | #3239 | Flied Septe | mber 26, 2006 | | | | | | | |
| For BIOMARKERS FOR OVARIAN CANCER | | | | | | | | | | |
| Art Unit N/A | | Examiner Not Yet Assigned | | | | | | | | |
| This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application. | | | | | | | | | | |
| The requested extension and fee are as follows (check t | lime period desired a | and enter the appropriat | e fee below): | | | | | | | |
| | <u>Fee</u> | Small Entity Fee | | | | | | | | |
| One month (37 CFR 1.17(a)(1)) | \$120 | \$60 | \$ | | | | | | | |
| Two months (37 CFR 1.17(a)(2)) | \$460 | \$230 | \$ | | | | | | | |
| Three months (37 CFR 1.17(a)(3)) | \$1050 | \$525 | \$ | | | | | | | |
| Four months (37 CFR 1.17(a)(4)) | \$1640 | \$820 | \$ | | | | | | | |
| x Five months (37 CFR 1.17(a)(5)) | \$2230 | \$1115 | \$ 1,115.00 | | | | | | | |
| X Applicant claims small entity status. See 37 CFR 1.27. | | | | | | | | | | |
| A check in the amount of the fee is enclosed. | | | | | | | | | | |
| Payment by credit card. Form PTO-2038 is at | ttached. | | | | | | | | | |
| X The Director has already been authorized to c | harge fees in this a | application to a Deposi | t Account. | | | | | | | |
| X The Director is hereby authorized to charge a | ny fees which may | be required, or credit a | any overpayment, to | | | | | | | |
| Deposit Account Number 04-1105 | . I have enclo | osed a duplicate copy | of this sheet. | | | | | | | |
| WARNING: Information on this form may become p Provide credit card information and authorization of | | ormation should not be in | ncluded on this form. | | | | | | | |
| I am the applicant/inventor. | | | | | | | | | | |
| assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). | | | | | | | | | | |
| x attorney or agent of record. Req | gistration Number | 53,624 | _ | | | | | | | |
| attorney of agent under Ar OFR Registration rumber iffacting un | 1.34. nder 37 CFR 1.34 | _ | | | | | | | | |
| Signature | | October 30, 2007 Date | | | | | | | | |
| Jonathan M. Sparks, Ph.D. | (617) 517-5543 | | | | | | | | | |
| Typed or printed name | Telephone Number | | | | | | | | | |
| NOTE: Signatures of all the inventors or assignees of record of the ethan one signature is required, see below. | entire interest or their repre | esentative(s) are required. Sub | mit multiple forms if more | | | | | | | |
| Total of 1 forms are subm | nitted | | | | | | | | | |

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PTO/SB/17 (10-07)

Approved for use through 06/30/2010. OMB 0651-0032

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|------------------------------------------------------------------------------------------------------------------------------|-----------------------|-----------------------------|-------------------------|--------------------------------------|-----------------------|-------------------------|----------------|-----------------|
| Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL For FY 2008 | | . } | Complete if Known | | | | | |
| | | 118). | | | 0/594,874-Conf. #3259 | | | |
| | | L | | | September 28, 2006 | | | |
| | | L | 1 Wet Harried Willering | | Daniel W. Chan | | | |
| | | —[- | Examiner Name N | | Not Yet Assigned | | | |
| X Applicant claims small entity status. See 37 CFR 1.27 | | | Art Unit | V/A | Α | | | |
| TOTAL AMOUNT OF PAYMEN | т | (\$) 1,180.00 | | Attorney Docket I | No. 6 | 31154(71699) |) | |
| METHOD OF PAYMENT | (check all | that apply) | | | | | | |
| Check Credit Ca | ırd | Money Order | None | L `` | lease identify | · ——— | | - |
| x Deposit Account Depos | it Account Num | ber: 04-110 | 05 | Deposit A | ccount Name: | The Johns | Hopkins L | Iniversity |
| For the above-identif | ied deposit | account, the Direct | tor is | hereby authorize | d to: (chec | k all that apply |) | |
| x Charge fee(s) | indicated be | elow | | Charge | fee(s) ind | icated below, e | except for t | he filing fee |
| Charge any ad fee(s) under 37 | | (s) or underpaymer and 1.17 | nts of | x Credit | any overpa | yments | | |
| FEE CALCULATION | | | | | | | | |
| 1. BASIC FILING, SEARCH, | | | | | | | | |
| | FILIN | NG FEES Small Entity | SEA | RCH FEES Small Entity | EXAMIN | ATION FEES Small Entity | • | |
| Application Type | Fee (\$) | | ee (\$) | | Fee (\$) | Fee (\$) | Fees I | Paid (\$) |
| Utility | 310 | 155 | 510 | 255 | 210 | 105 | | |
| Design | 210 | 105 | 100 | 50 | 130 | 65 | | |
| Plant | 210 | 105 | 310 | 155 | 160 | 80 | | |
| Reissue | 310 | 155 | 510 | 255 | 620 | 310 | | |
| Provisional | 210 | 105 | 0 | 0 | 0 | 0 | | |
| 2. EXCESS CLAIM FEES | | | | | | | | Small Entity |
| Fee Description Each claim over 20 (including | na Reissues | ·) | | | | | Fee (\$) 50 | Fee (\$) 25 |
| Each independent claim ove | - | | | | | | 210 | 105 |
| Multiple dependent claims | (| , | | | | | 370 | 185 |
| Total Claims Extra C | laims | Fee (\$) | Fee P | aid (\$) | Mu | ıltiple Depend | | |
| - = | x | = | | 14/ | | e (\$) | Fee Paid (| |
| HP = highest number of total claim | ns paid for, if | greater than 20. | | | | | | <u> </u> |
| Indep. Claims Extra C | laims | Fee (\$) | Fee P | aid (\$) | | | | |
| | x | | | | | | | |
| HP = highest number of independ | ent claims pa | id for, if greater than 3. | | | | | | |
| 3. APPLICATION SIZE FEE | wines :: | ad 100 abases af | nna- / | avaludina alaat | micalle £1 | ad canuonas = | r committee | |
| If the specification and dra listings under 37 CFR 1 | | | | | | | | 0 |
| sheets or fraction thereo | f. See 35 l | U.S.C. 41(a)(1)(G) | and 3 | 37 CFR 1.16(s). | | ,, •• | | Ŧ |
| | tra Sheets | | | Iditional 50 or frac | tion thereof | Fee (\$) | Fee | Paid (\$) |
| 112 - 100 = | 12 | /50 = 1 | | (round up to a who | le number) | x 125 | = | 125 |
| 4. OTHER FEE(S) | | | | | | | Fees | Paid (\$) |
| Non-English Specification | on, \$130 f | ee (no small entity | disco | unt) | | | | 45.00 |
| Other (e.g., late filing su | charge): ² | 255 Extension fo | or res | ponse within fif | th month | | 1,1 | 15.00 |
| | $\setminus \alpha$ | A | | | | | | |
| SUBMITTED BY | AMV | V | | Pagistration No. | | | | |
| Signature 60 | \sqrt{V} | | | Registration No. (Attorney/Agent) | 53,624 | Telephone | (617) 51 | 7-5543 |
| Name (Print/Type) Jonathan | M. Søark | , Ph.D. | | | | Date | October 3 | 30, 2007 |
| | 04465 | 4 AED 4074 | , , | | | , - | | |
| /2007 GFREY1 00000123 | 041105 | 10594874 | | | | | | |

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